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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION**  
**(37 CFR 1.63)**

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	RP-01483-US1
First Named Inventor	MERCIER
<b>COMPLETE IF KNOWN</b>	
Application Number	Unassigned
Filing Date	Unassigned
Art Unit	Unassigned
Examiner Name	Unassigned

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Roll-Related Reactive System

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) [redacted] as United States Application Number or PCT International

Application Number [redacted] and was amended on (MM/DD/YYYY) [redacted] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
[redacted]	[redacted]	[redacted]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to:  Customer Number: **28735** OR  Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) <b>MERCIER</b>	Family Name or Surname <b>Daniel</b>
---	--

Inventor's Signature 	Date <b>12/02/04</b>
---	-------------------------

Residence: City Longueuil	State Quebec	Country Canada	Citizenship Canadian
------------------------------	-----------------	-------------------	-------------------------

Mailing Address 8-100 Lemoyne Est			
--------------------------------------	--	--	--

City Longueuil	State Quebec	ZIP J4H 1V2	Country Canada
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**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) <b>Yves</b>	Family Name or Surname <b>BERTHIAUME</b>
--	--

Inventor's Signature	Date
-------------------------	------

Residence: City Mont St-Hilaire	State Quebec	Country Canada	Citizenship Canadian
------------------------------------	-----------------	-------------------	-------------------------

Mailing Address			
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City Mont St-Hilaire	State Quebec	ZIP J3H 6E6	Country Canada
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Additional inventors or a legal representative are being named on the **01** supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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**DECLARATION — Utility or Design Patent Application**

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NAME OF SOLE OR FIRST INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
---------------------------------	---

Given Name (first and middle [if any]) MERCIER	Family Name or Surname Daniel
--	-------------------------------------

Inventor's Signature	Date
-------------------------	------

Residence: City Longueuil	State Quebec	Country Canada	Citizenship Canadian
------------------------------	-----------------	-------------------	-------------------------

Mailing Address 8-100 Lemoyne Est
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City Longueuil	State Quebec	ZIP J4H 1V2	Country Canada
-------------------	-----------------	----------------	-------------------

NAME OF SECOND INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--------------------------	---

Given Name (first and middle [if any]) Yves	Family Name BERTHIAUME
---	---------------------------

Inventor's Signature	Date <i>FEB 13 2004</i>
-------------------------	----------------------------

Residence: City Mont St-Hilaire	State Quebec	Country Canada	Citizenship Canadian
------------------------------------	-----------------	-------------------	-------------------------

Mailing Address
-----------------

City Mont St-Hilaire	State Quebec	ZIP J3H 6E6	Country Canada
-------------------------	-----------------	----------------	-------------------

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<b>DECLARATION</b>		<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>	
Page <u>01</u> of <u>01</u>			
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))  Remy		Family Name or Surname  BIRON	
Inventor's Signature  	Date  <u>12/12/04</u>		
Mont St-Hilaire Residence: City  270 Des Patriotes Rd South Mailing Address	Quebec State	Canada Country	Canadian Citizenship
Mailing Address	City	State	J3H 3G7 Zip
<b>Name of Additional Joint Inventor, if any:</b>	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))  Alain		Family Name or Surname  MASSICOTTE	
Inventor's Signature  	Date		
Orford Residence: City  15 Du Souchet Mailing Address	Quebec State	Canada Country	Canadian Citizenship
Mailing Address	Orford City	State	J1X 7H2 Zip
<b>Name of Additional Joint Inventor, if any:</b>	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature  	Date		
Residence: City  Mailing Address	State	Country	Citizenship
Mailing Address	City	State	Zip
			Country

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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**

Page 01 of 01

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Remy		BIRON	
Inventor's Signature		Date	
Mont St-Hilaire Residence: City	Quebec State	Canada Country	Canadian Citizenship
270 Des Patriotes Rd South Mailing Address			
Mailing Address			
City	State	Zip	Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Alain		MASSICOTTE	
Inventor's Signature		Date 12/02/2004	
Orford Residence: City	Quebec State	Canada Country	Canadian Citizenship
15 Du Souchet Mailing Address			
Mailing Address			
Orford City	State	Zip	Canada Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

<b>Application Number</b>	NA
<b>Filing Date</b>	NA
<b>First Named Inventor</b>	MERCIER
<b>Title</b>	Roll-Related Reactive System
<b>Art Unit</b>	NA
<b>Examiner Name</b>	NA
<b>Attorney Docket Number</b>	RP-01483-US1

I hereby appoint:

 Practitioners associated with the Customer Number:

00909

OR

 Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

 The address associated with the above-mentioned Customer Number:

OR

 The address associated with Customer Number:

OR

<input type="checkbox"/>	Firm or Individual Name	
Address		
Address		
City	State	Zip
Country		
Telephone	Fax	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Name	MERCIER, Daniel	
Signature	<i>Daniel Mmercier</i>	
Date	12/02/04	Telephone 450-670-0136

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 \*Total of 04 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<b>Filing Date</b>	NA
<b>First Named Inventor</b>	MERCIER
<b>Title</b>	Roll-Related Reactive System
<b>Art Unit</b>	NA
<b>Examiner Name</b>	NA
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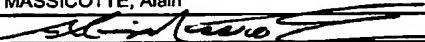
OR

<input type="checkbox"/>	Firm or Individual Name	
Address		
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## SIGNATURE of Applicant or Assignee of Record

Name	MASSICOTTE, Alain
Signature	
Date	12/02/2004
Telephone	819-847-2702

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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<b>Filing Date</b>	NA
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<b>Title</b>	Roll-Related Reactive System
<b>Art Unit</b>	NA
<b>Examiner Name</b>	NA
<b>Attorney Docket Number</b>	RP-01483-US1

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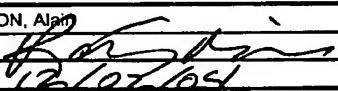
OR

<input type="checkbox"/>	Firm or Individual Name			
Address				
Address				
City	State	Zip		
Country				
Telephone	Fax			

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 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
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## SIGNATURE of Applicant or Assignee of Record

Name	BIRON, Alan		
Signature			
Date	12/07/04	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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First Named Inventor	MERCIER
Title	Roll-Related Reactive System
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Attorney Docket Number	RP-01483-US1

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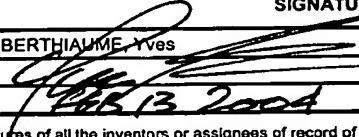
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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	BERTHIAUME Yves		
Signature			
Date	1/25/2004	Telephone	

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